EXECUTIVE LOBBYING	C 2.	(abbyist Registration No.		
COVERING JANUARY L - JUNE	30 <u>, 2 008</u> - DUE AUGUST IS	-		THE CALL OF THE CA
COVERING JANUARY 1 - DECE	MHER 31, DUE FEBRUARY	15	POR O	irk Date <u>8 12 0</u>
Mail to: the Board of Ethics, 2415 Quail D	r., 3rd Floor, Raton Rouge, LA 7080	a 1	8/0	BH
OR				
Fax 19; (225)763-8787 or (225)763-8780				
1. Name Hebert	Jason	E.	30	71971
lam	First	м	••	
2. Business Address: 611 No	orth St. Bahan Ko	uge, LA 7	2082)	
bereet and No	s. usy	alate	Z4p	ŗ.
Mailing Address	NE AS ABOVE			: .
3. Business Phone	650-299V			
	de and l'elephone Number	•	,	٠.
 Total of all executive Jobbying experiences from Schoolules 	nditures made January I through June A and Bi	a 30:	_(/)	
 Total of all executive lobbying experience (When Applicable) (Include expend) 	nditures made July I through Decemb Jouret from Scheduler A and B)	per 31: \$	<u> 80 N/A</u>	<u>.</u> 6
6. Total of all executive hybbying expe- (Line + whited to Line 5 should equal bi-		\$	_ <i>P</i>	
7. Did you make an expendiente excen	ding \$50 on one occasion for an exce	utive branch offic	ial:	
From Jacobey 1 through June 307 From July 1 through December 31		No 🖸	NA 🔟	
If the answer to either question in I	Nunaber 7 always is YES, complete Sch	edule A and attac	አ .	
8. Dld you make expenditures succedi	ng the sum of \$250 for an exceptive b	rench official:		
From January 1 dirough June 30? From July 1 through December 31?	Yes 🔲	No 🖪	NA 🖬	
If the answer to either question in ?	Aumber 8 above in YES, complete Schi	edule A and ottac	h.	
 Did you expend funds for any recep officials were invited during this rep 	tion, social gathering, or other function parting partod?	un to which more	than tweety-five ex	ecutive branch
	Yes 🗋 No 🖸	/		
If the answer to Number 9 above is	YES, complete Schedule B and areach.			
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ramp bu/, ices, //U4	1 - 5 - 1			

EXECUTIVE LOBBYING EXPENDITURE REPORT

Executive Lobbyist Registration No.

10. PROVIDE BELOW (a) the name of the executive branch department as listed in the executive branch schedule; (b) the aggregate rotal of all expanditures attributable to the department made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the department made during the July 1 - December 31 reporting period when applicables (d) the aggregate total of all expenditures made in a coloudor year agributable to the department.

lij	a. Name of Department: P/n	
	b. Total of all expenditures made January 1 through June 30:	\$
	e. Total of all expenditures made July 1 through December 31: (When applicable)	\$
	d. Total of all expenditures made during the calendar year:	\$
1)	s. Name of Department:	
	b. Total of all expenditures made January 1 through June 30:	s
	c. Total of all expenditures made July 1 through December 31: (When applicable)	s
	d. Total of all expenditures made during the calendar year.	<u> </u>
3)	2. Name of Department:	
	 Yotal of all expenditures made lanuary 1 through fune 30: 	\$
	 C. Total of all expenditures made July 1 through December 31: (When applicable) 	s
	d. Total of all expenditures made during the calendar years	s

bounch 11 seriod: (¢) ac) applicable: (d) the aggregate total of all expenditures made in a calondar year antributable to the agency.

1)	a	Name of Department and Individual Agency:	
	ъ.	Total of all expenditures made January 1 through June 30:	\$
	с.	Total of all expenditures made July 1 chrough December 31: (When applicable)	\$

d. Total of all expenditures made during the calendar year:

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2)	a. Name of Department and Individual Agency.	
	b. Total of all expenditures made January 1 through June 30:	<u></u>
	 Total of all expenditures made July 1 through December 31: (When applicable) 	s
	d. Total of all expenditures made during the calendar year:	5
3)	a. Name of Department and Individual Agency:	
	b. Total of all expenditures made Junuary 1 chaough June 30:	\$ _
	 Total of all expenditures made July 1 through December 31: (When applicable) 	· 5
	d. Total of all expenditures made during the calendar year:	s

CERTIFICATION OF ACCURACY

I hereby certify that the information commined herein is true and correct to the best of my knowledge, information, and belief, that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist

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